



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E362474**

INTERSTATE <input type="checkbox"/>	CITY STREET <input checked="" type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input type="checkbox"/>

CASE #	14-2486		
LOCAL AGENCY CODING	0664		
TOTAL # OF UNITS	02	OBJECT STRUCK	

TRIBAL RESERVATION	
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M	M	D	D	Y	Y	Y	Y	TIME (2400)	COUNTY #	MILES	CITY #
DATE OF COLLISION	10	05	2014	1317	31						

ON (PRIMARY TRAFFIC WAY)	INTERSECTION <input checked="" type="checkbox"/>	NON-INTERSECTION <input type="checkbox"/>
MARKET PL	BLOCK NO. <input checked="" type="checkbox"/>	9100
	MILE POST	

DISTANCE	OF (REFERENCE OR CROSS STREET)
	91ST AVE NE

UNIT 01	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE D: 3605479198
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LAST NAME	FAIR	FIRST NAME	ANITA	MIDDLE INITIAL	K
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STREET NEW ADDRESS	5528 RV LAKEWOOD RD
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CITY	STANWOOD	ST	WA	ZIP	982927023
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CDL	RESTRICTIONS B	ENDORSEMENTS	
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DRIVER'S LICENSE #	FAIR*AK418NF	STATE	WA	SEX	F	D.O.B. MMDDYYYY	08	06	1959
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG 2	RESTR. 4	EJECT 1	HELMET USE	INJURY CLASS 1	NATURE OF INJURIES
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LICENSE PLATE #	ABV4265	STATE	WA	VIN#	1FMDU34E4VZA77983
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	1997	MAKE	FORD	MODEL	EXPLR	STYLE	UT	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. **ANITA FAIR 5528 LAKEWOOD RD STANWOOD WA 98292**

LIABILITY INSURANCE IN EFFECT <input type="checkbox"/>	INSURANCE CO & POLICY #	CITATION #	CHARGE
VEHICLE LEGALLY STANDING YES <input type="checkbox"/> NO <input type="checkbox"/>			



UNIT 02	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	PEDESTRIAN <input type="checkbox"/>	PROPERTY OWNER <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE D: 2533597689
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LAST NAME	JOHNSTON	FIRST NAME	TESSA	MIDDLE INITIAL	M
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STREET NEW ADDRESS	10611 24TH ST SE
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CITY	LAKE STEVENS	ST	WA	ZIP	982585664
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CDL	RESTRICTIONS	ENDORSEMENTS	
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DRIVER'S LICENSE #	JOHNSTM063K8	STATE	WA	SEX	F	D.O.B. MMDDYYYY	05	28	1994
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG 2	RESTR. 4	EJECT 1	HELMET USE	INJURY CLASS 7	NATURE OF INJURIES BACK PAIN
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LICENSE PLATE #	AIX4963	STATE	WA	VIN#	1G2WP52K2VF205023
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	1997	MAKE	PONT	MODEL	GRA4D	STYLE	4D	VEHICLE TOWED YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	TOWED BY	RESCUE	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. **TESSA JOHNSTON 8515 NORTH WAY SW LAKEWOOD WA 98498**

LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY # STATE FARM 2036009F1147	CITATION #	CHARGE
VEHICLE LEGALLY STANDING YES <input type="checkbox"/> NO <input type="checkbox"/>			



OFFICER'S NAME (PRINT)	C. WELLS #131	BADGE OR ID #	131	AGENCY	WA0311900
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STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E362474**

CASE # **14-2486**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)		FAIR JON E																
ADDRESS & PHONE #		12513 8TH DR NW TULALIP WA 982717023 3605479198																
		SEX	M	D.O.B. MMDDYYYY	08			29			1950							
PASSENGER	<input checked="" type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #	1	SEAT POS.	3	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE		INJURY CLASS	1	NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)		JOHNSTON CHAYCE F																
ADDRESS & PHONE #		10611 24TH ST SE LAKE STEVENS WA 98258 4253348246																
		SEX	F	D.O.B. MMDDYYYY	01			07			1998							
PASSENGER	<input checked="" type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #	2	SEAT POS.	3	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE		INJURY CLASS	1	NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)		AHLES GREGORY A																
ADDRESS & PHONE #		7923 GRACE LN LAKE STEVENS WA 98258 4253348246																
		SEX	M	D.O.B. MMDDYYYY	06			19			1949							
PASSENGER	<input type="checkbox"/>	WITNESS	<input checked="" type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES

NARRATIVE

Unit #1 was at the intersection of Market PI / 91st Ave NE - turning left. Unit #2 was traveling westbound on Market PI. Unit #1 turned left and struck Unit #2 who had proceeded into the intersection on a green light.

Unit #1 admitted fault and failing to yield right of way.

Unit #2 towed from the scene.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

C. WELLS #131

10-05-14 04:40 PM

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

DATED

PLACE SIGNED

APPROVED BY

SGT. C. VALVICK 71

DATE

10/6/2014 5:35:13 PM

BADGE OR ID # **131**

ORI #

WA0311900

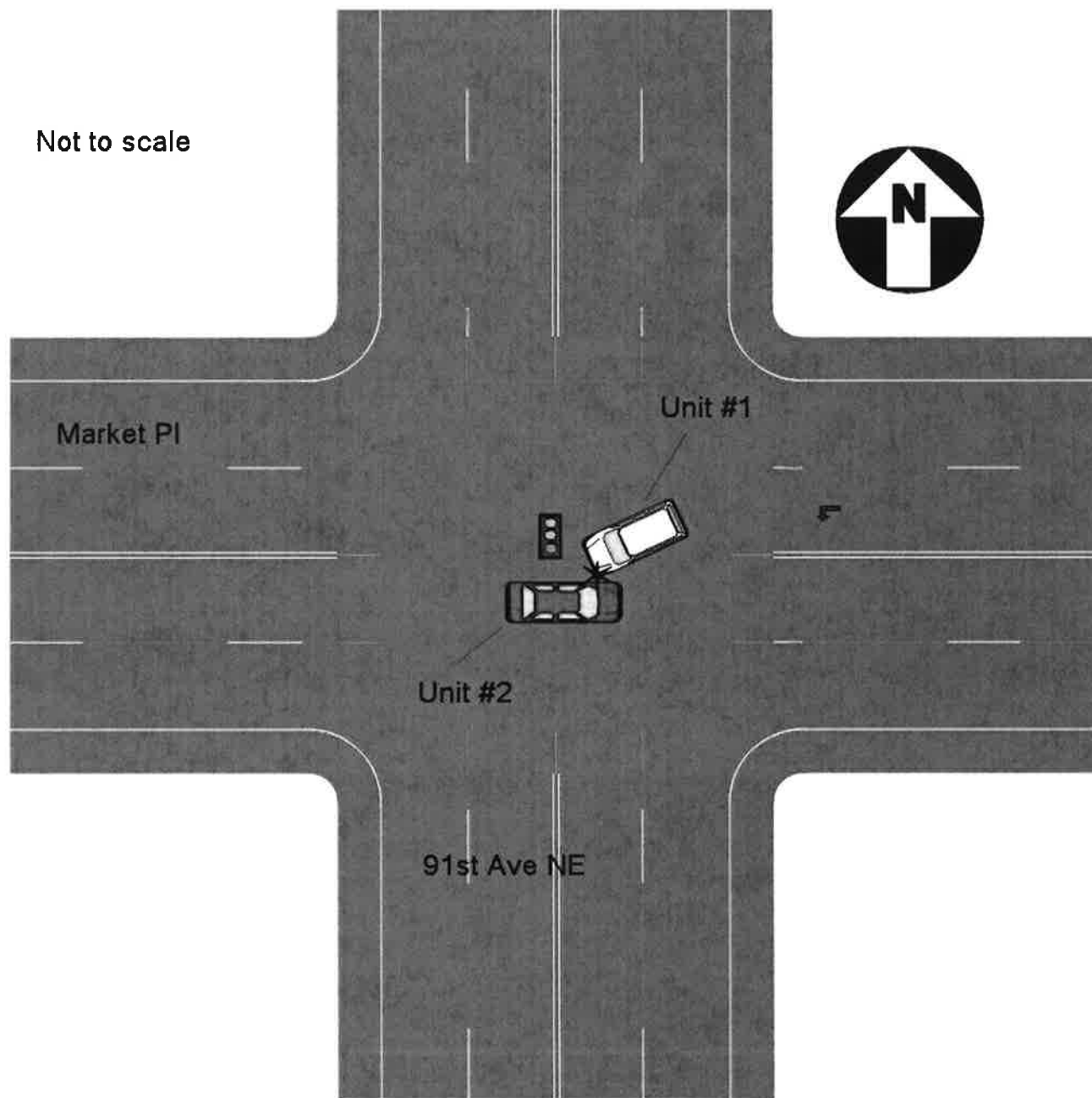
TIME POLICE DISPATCHED

1:17 PM

TIME POLICE ARRIVED

1:17 PM

Not to scale



LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

14-2466

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) FAIR, Anita Kay	RACE W	ETH	SEX F	DOB 8-6-59	AGE 54	HGT 5'4"	WGT 150	HAIR	EYES
STREET ADDRESS 5528 RV Lakewood Rd		CITY Stanwood			STATE WA	ZIP 98292	RES. STATUS			
HOME PHONE		CELL PHONE 360-547-9198			PLACE OF EMPLOYMENT					
WORK PHONE		EMAIL ADDRESS								

I, _____, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I was heading west on Market Place at 91st.
I thought I ~~had a car~~ the opposite side had a red
and I could go left. I was wrong.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: Anita K. Fair	DATE SIGNED 10-5-14	LOCATION SIGNED Lake Stevens
OFFICER/NUMBER: C. Wallis / 131	DATE SIGNED 10/5/14	LOCATION SIGNED LKS

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE (OF)

CHECK ALL THAT APPLY:

UNIFORM WASHINGTON STATE

CASE / EVIDENCE NUMBER

14-02466

TOW / IMPOUND
AND INVENTORY RECORD

- ☒ NON-IMPOUND / TOW
☐ AAA or OTHER ROADSIDE ASSISTANCE
☐ EVIDENCE
☐ SEIZED UNDER RCW 69.50.505
☒ IMPOUND ONLY
☐ DUI/PC IMPOUND WITH 12 HOUR HOLD
☐ DWLS IMPOUND WITH _____ DAY HOLD
☐ INFORMATIONAL COPY GIVEN TO SUSPENDED DRIVER.
☐ REGISTERED OWNER MAY REDEEM _____

☐ CHECK INDICATES DRIVER IS DWLS/R AND IS NOT THE REGISTERED OWNER. REGISTERED OWNER / LEGAL OWNER OR AGENT OF THE OWNER MAY REDEEM AT THE END OF THE IMPOUND HOLD.

☐ CHECK INDICATES THE DRIVER IS DWLS AND IS THE REGISTERED OWNER. DRIVER WILL NEED A SEPARATE RELEASE FORM FROM THE COURT OR THE AGENCY ORDERING THE IMPOUND.

VEHICLE INFORMATION

VIN

1 G 2 W P 5 2 K 2 N F 2 0 5 0 2 3

LICENSE

AIX 4963

STATE

WA

YEAR

1997

MAKE

Pont

MODEL

GRA 40

MILEAGE

☐ Report of Sale

☐ Digital

STYLE

4 door

COLOR

RED

DRIVER

NAME (LAST, FIRST, MI)

JOHNSTON, TESSA M

STREET ADDRESS

8515 NORTH WAY SW

CITY, STATE, ZIP CODE

LAKEWOOD, WA 98498

PHONE

DOB

5-28-54

REGISTERED OWNER

NAME (LAST, FIRST, MI)

JOHNSTON, TESSA M

STREET ADDRESS

NEW-10611 24TH ST SE

CITY, STATE, ZIP CODE

LAKE STEVENS, WA 98258

PHONE

253-359-7689

LEGAL OWNER

NAME (LAST, FIRST, MI)

SAME

STREET ADDRESS

CITY, STATE, ZIP CODE

PHONE

AUTHORIZATION AND RECEIPT

ON THIS DATE OF 10/5/14 AT 1317 (24 HOUR) PURSUANT TO RCW 46.55.085 / .113 AND HAVING PERSONALLY INVENTORIED THE ITEMS IN THE DESCRIBED VEHICLE, I HEREBY AUTHORIZE SPEEDWAY TOWING (TOWING FIRM)

TO REMOVE THIS VEHICLE FROM 91ST @ MARKET PL.

I CERTIFY THAT I HAVE RECEIVED THE ABOVE VEHICLE AND ITS CONTENTS LISTED BELOW.

TOW DRIVER'S SIGNATURE

Bate mdr

DOL TOW TRUCK NO.

5348-03

Bate

DATE 10-5-14

EQUIPMENT

DAMAGE

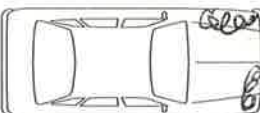
EVIDENCE (DRIVER'S SIDE)

EVIDENCE (PASSENGER'S SIDE)

- ☐ GLOVE BOX LOCKED
☐ KEYS []
☐ AUTO STEREO
☐ AUDIO TAPES / CD'S []
☐ CB RADIO
☐ RADAR DETECTOR
☐ TRUNK LOCKED
☐ SPARE TIRE
☐ JACK
☐ CHAINS
☐ OTHER _____

- ☒ FRONT
☒ R FRONT
☐ R SIDE
☐ R REAR
☒ L FRONT
☐ L SIDE
☐ L REAR
☐ REAR
☐ TOP
☐ UNDERCARRIAGE
☐ OTHER _____

SHADE DAMAGED AREA



INVENTORY/EVIDENCE

NARRATIVE OR DIAGRAM

(List reason(s) for impound.)

VEHICLE INVOLVED IN COLLISION

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREMENTIONED IS TRUE AND CORRECT. (RCW 9A.72.085)

OFFICER'S SIGNATURE

X

S. WARBIS 112

Snohomish County

BADGE NO. 112

DRIVER'S SIGNATURE CERTIFIES RECEIPT OF TOW/IMPOUND REPORT AND INFORMATION FOR DRIVERS TO REDEEM IMPOUNDED VEHICLE.

DRIVER'S SIGNATURE

X

LSPD

ORIGINAL

CHECK ALL THAT APPLY:

UNIFORM WASHINGTON STATE

CASE / EVIDENCE NUMBER

14-02466

TOW / IMPOUND
AND INVENTORY RECORD

- ☒ NON-IMPOUND / TOW
☐ AAA or OTHER ROADSIDE ASSISTANCE
☐ EVIDENCE
☐ SEIZED UNDER RCW 69.50.505
☒ IMPOUND ONLY
☐ DUI/PC IMPOUND WITH 12 HOUR HOLD
☐ DWLS IMPOUND WITH _____ DAY HOLD
☐ INFORMATIONAL COPY GIVEN TO SUSPENDED DRIVER.
☐ REGISTERED OWNER MAY REDEEM _____
☐ CHECK INDICATES DRIVER IS DWLS/R AND IS NOT THE REGISTERED OWNER. REGISTERED OWNER / LEGAL OWNER OR AGENT OF THE OWNER MAY REDEEM AT THE END OF THE IMPOUND HOLD.
☐ CHECK INDICATES THE DRIVER IS DWLS AND IS THE REGISTERED OWNER. DRIVER WILL NEED A SEPARATE RELEASE FORM FROM THE COURT OR THE AGENCY ORDERING THE IMPOUND.

VEHICLE INFORMATION

VIN

1 G 2 W P 5 2 K 2 N I F 2 0 5 0 2 3

LICENSE

AIX 4963

STATE

WA

YEAR

1997

MAKE

Pont

MODEL

GTR 4.0

MILEAGE

☐ Report of Sale☐ Digital

STYLE

4 door

COLOR

RED

DRIVER

NAME (LAST, FIRST, MI)

JOHNSON, TESSA M

STREET ADDRESS

8515 NORTH WAY SW

CITY, STATE, ZIP CODE

LAKEWOOD, WA 98478

PHONE

DOB

5-28-94

REGISTERED OWNER

NAME (LAST, FIRST, MI)

JOHNSON, TESSA M

STREET ADDRESS

NEW-10611 24TH ST SE

CITY, STATE, ZIP CODE

LAKE STEVENS, WA 98258

PHONE

253-359-7689

LEGAL OWNER

NAME (LAST, FIRST, MI)

SAME

STREET ADDRESS

CITY, STATE, ZIP CODE

PHONE

AUTHORIZATION AND RECEIPT

ON THIS DATE OF 10/5/14 AT 1317 (24 HOUR) PURSUANT TO RCW 46.55.085 / .113 AND HAVING PERSONALLY INVENTORIED THE ITEMS IN THE DESCRIBED VEHICLE, I HEREBY AUTHORIZE SPEEDWAY TOWING (TOWING FIRM)

TO REMOVE THIS VEHICLE FROM 91ST @ MARKET PL.

I CERTIFY THAT I HAVE RECEIVED THE ABOVE VEHICLE AND ITS CONTENTS LISTED BELOW.

TOW DRIVER'S SIGNATURE

Belle mdrDOL TOW TRUCK NO. LF 800DATE 10-5-14

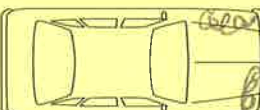
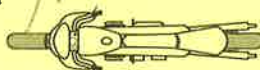
EQUIPMENT

- ☐ GLOVE BOX LOCKED
☐ KEYS []
☐ AUTO STEREO
☐ AUDIO TAPES / CD'S []
☐ CB RADIO
☐ RADAR DETECTOR
☐ TRUNK LOCKED
☐ SPARE TIRE
☐ JACK
☐ CHAINS
☐ OTHER _____

DAMAGE

- ☒ FRONT
☒ R FRONT
☒ R SIDE
☐ R REAR
☒ L FRONT
☐ L SIDE
☐ L REAR
☐ REAR
☐ TOP
☐ UNDERCARRIAGE
☐ OTHER _____

SHADE DAMAGED AREA



EVIDENCE (DRIVER'S SIDE)

EVIDENCE (PASSENGER'S SIDE)

INVENTORY/EVIDENCE

NARRATIVE OR DIAGRAM

(List reason(s) for impound.)

VEHICLE INVOLVED IN COLLISION

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREMENTIONED IS TRUE AND CORRECT. (RCW 9A.72.085)

OFFICER'S SIGNATURE X

S. WARRIS 112

Snohomish County

BADGE NO. 112

DRIVER'S SIGNATURE CERTIFIES RECEIPT OF TOW/IMPOUND REPORT AND INFORMATION FOR DRIVERS TO REDEEM IMPOUNDED VEHICLE.

DRIVER'S SIGNATURE X

3000-110-076 (R 7/11)

OFFICER

LSPD
ORIGINAL

Incident History for: #SS14019582 Xref: #AG14002853

Case Numbers: \$SS14002466

Entered 10/05/14 13:17:19 BY SPCT04 SP0307

Dispatched 10/05/14 13:17:37 BY SPSC40 SP0174

Enroute 10/05/14 13:17:37

Onscene 10/05/14 13:17:52

Closed 10/05/14 14:00:15

Initial Type: COL Initial Alarm Level: Final Alarm Level:

Final Type: COL (COLLISION, NON-PRIORITY) Pri: 2 Dispo: H

Police BLK: SS002 Fire BLK: AG1518 Map Page: 397E-1 Group: SS1 Beat: WEST

Src: T

Loc: 91 AV NE/MARKET PL ,LKS (V)

Loc Info:

Name: ANSTEAD, NICOLE

Addr:

Phone: 4253445347

/1317 (SP0307) ENTRY ,SMALL RED PC INTO LIGHT POLE UNK INJS
/1317 CROSS #AG14002853
/1317 (SP0174) AGCADV ,BCST
/1317 DISPER 19D3 #SS120 BERNHARD, OFFICER (KERRY)
/1317 ASSTER 19D1 #SS75 CHRISTENSEN, OFCR (CHAD)
/1317 ASSTOS 19R1 #SS131 WELLS, OFCR (CHAD)
/1318 MISC 19R1 ,PARTIALLY BLOCKING
/1318 (SP0307) CHANGE NAM: --> ANSTEAD, NICOLE,
PHO: --> 4253445347
/1319 (SP0174) SUPP TXT: PD ONSC, ADULT CABN, BK PX
/1321 ASSTOS 19D2 [91 AV NE/MARKET PL ,LKS]
#SS112 WARBIS, OFFICER (STEVE)
/1321 CLEAR 19D1
/1322 ASNCAS 19R1 \$SS14002466
/1327 ROTREQ 19R1 TOW 5348 LKS SPEEDWAY TOWING INC
3605635630
/1329 MISC 19R1 ,SPEEDWAY TOW ENRT
/1329 ONSCNE 19D3
/1332 (SS112) REMINQ 19D2 MDTVEH, AIX4963, , WA, , , , , , , , , ,
/1334 REMINQ 19D2 MDTWANT, JOHNSTON, TESSA, M, 052894, , , WA, , , , , , , , , ,
, ,
/1343 (SP0297) MISC 19D2 ,TOW OS
/1400 CLEAR 19R1 D/H
/1400 CLEAR 19D2 D/H
/1400 CLEAR 19D3 D/H
/1400 CLOSE 19D3

LSPD
ORIGINAL

PLEASE IMPROVE
ENTRY

IMPOUNDED VEHICLE ENTRY FORM

Type of Impound: (Check one)

Police Impound ✓

Private Impound _____ Repo _____

For Police Impound: Reason for Impound and Case Number (if available):

(DUI, DWLS, COL, ABAND, VEHR, EVIDENCE, Etc.)

Case Number: 14-02466Reason: COLLISION

MKE/ (Circle One)

EVI

EVIP

EVR

ORI/ WA0311900LIC/ ATX4A63 LIS/ W4 LIY/ 2015 LIT/ PCVIN/ 1G2WP52K2V-205023VYR/ 1997 VMA/ PONT ac VMO/ Grand AMVST/ 4dr VCO/ RedDATE OF IMPOUND/REPO: 10/05/14TOW COMPANY NAME: SPEEDWAY TOWINGTOW COMPANY OCA/** 5343PHONE #: 360.903.5630

**(For Repossession Company with no DOL issued OCA, use 5999)

Address Taken From: 911 MarketCity of Jurisdiction: LAKE STEVENS.

For Repo:

Financial Institution:

Contact Person: _____

Phone #: _____

For Teletype:

Date: 10/06/14Entered By: 388WAC #: 14V0112390

Checked By: _____

Checked Date: _____

CHECK ALL THAT APPLY:

- ☒ NON-IMPOUND / TOW
☐ AAA or OTHER ROADSIDE ASSISTANCE
☐ EVIDENCE
☐ SEIZED UNDER RCW 69.50.505
☒ IMPOUND ONLY
☐ DUI/PC IMPOUND WITH 12 HOUR HOLD
☐ DWLS IMPOUND WITH _____ DAY HOLD
☐ INFORMATIONAL COPY GIVEN TO SUSPENDED DRIVER.
☐ REGISTERED OWNER MAY REDEEM
☐ CHECK INDICATES DRIVER IS DWLS/R AND IS NOT THE REGISTERED OWNER. REGISTERED OWNER / LEGAL OWNER OR AGENT OF THE OWNER MAY REDEEM AT THE END OF THE IMPOUND HOLD.
☐ CHECK INDICATES THE DRIVER IS DWLS AND IS THE REGISTERED OWNER. DRIVER WILL NEED A SEPARATE RELEASE FORM FROM THE COURT OR THE AGENCY ORDERING THE IMPOUND.

UNIFORM WASHINGTON STATE

TOW / IMPOUND
AND INVENTORY RECORD

CASE / EVIDENCE NUMBER

1402466

VEHICLE INFORMATION

VIN 1G1ZWP52K2VF205023									
LICENSE AIXL463	STATE WA	YEAR 1997	MAKE Pont	MODEL GRA 4.0					
MILEAGE <input type="checkbox"/> Report of Sale <input type="checkbox"/> Digital		STYLE 4 door	COLOR red						

DRIVER

REGISTERED OWNER

LEGAL OWNER

NAME (LAST, FIRST, MI) JOHNSON, TESSA M	NAME (LAST, FIRST, MI) JOHNSON, TESSA M	NAME (LAST, FIRST, MI) SAME
STREET ADDRESS 8515 NORTH WAY SW	STREET ADDRESS NEW-1011 24TH ST SE	STREET ADDRESS
CITY, STATE, ZIP CODE LAKEWOOD, WA 98498	CITY, STATE, ZIP CODE LAKE STEVENS, WA 98388	CITY, STATE, ZIP CODE
PHONE 5-2854	PHONE 253-354-7689	PHONE

AUTHORIZATION AND RECEIPT

ON THIS DATE OF 10/5/14 AT 1317 (24 HOUR) PURSUANT TO RCW 46.55.005 / .113 AND HAVING PERSONALLY INVENTORIED THE ITEMS IN THE DESCRIBED VEHICLE, I HEREBY AUTHORIZE SPEEDWAY TOWING (TOWING FIRM)

TO REMOVE THIS VEHICLE FROM 91ST & MARKET PL.

I CERTIFY THAT I HAVE RECEIVED THE ABOVE VEHICLE AND ITS CONTENTS LISTED BELOW.

TOW DRIVER'S SIGNATURE Bela Miller DOL TOW TRUCK NO. 5348-03 DATE 10/5/14

EQUIPMENT	DAMAGE	EVIDENCE (DRIVER'S SIDE)	EVIDENCE (PASSENGER'S SIDE)
<input type="checkbox"/> GLOVE BOX LOCKED	<input checked="" type="checkbox"/> FRONT SHADE DAMAGE TO AREA		
<input type="checkbox"/> KEYS []	<input checked="" type="checkbox"/> R FRONT		
<input type="checkbox"/> AUTO STEREO	<input type="checkbox"/> R SIDE		
<input type="checkbox"/> AUDIO TAPES / CD'S []	<input type="checkbox"/> R REAR		
<input type="checkbox"/> CB RADIO	<input checked="" type="checkbox"/> L FRONT		
<input type="checkbox"/> RADAR DETECTOR	<input type="checkbox"/> L SIDE		
<input type="checkbox"/> TRUNK LOCKED	<input type="checkbox"/> L REAR		
<input type="checkbox"/> SPARE TIRE	<input type="checkbox"/> REAR		
<input type="checkbox"/> JACK	<input type="checkbox"/> TOP		
<input type="checkbox"/> CHAINS	<input type="checkbox"/> UNDERCARRIAGE		
<input type="checkbox"/> OTHER _____	<input type="checkbox"/> OTHER _____		

INVENTORY/EVIDENCE

NARRATIVE OR DIAGRAM

(List reason(s) for impound.)

VEHICLE INVOLVED IN COLLISION

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREMENTIONED IS TRUE AND CORRECT. (RCW 9A.72.080)

OFFICER'S SIGNATURE X S. WARRIS II SNOPAC COUNTY, WA BADGE NO. 112

DRIVER'S SIGNATURE CERTIFIES RECEIPT OF TOW/IMPOUND REPORT AND INFORMATION FOR DRIVERS TO REDEEM IMPOUNDED VEHICLE.

DRIVER'S SIGNATURE X LSPD

3000-110-070 (R 7/11)

SUPERVISOR

ORIGINAL